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| HUSBAND | | | | | Robert SABIN - SABIA | | | | | Husband | | | | | Robert SABIN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Born _____ Place _____ | | | | | Wife | | | | | 1. _____ | | | | | DR. ROBERT SABIN. DENTIST PAINLESS EXTRACTION OF TEETH. Crown and Bridge-work, Plate Work, Fillings, and all branches of Dental work promptly executed. Office in Bank Building Main St. Heber, Utah Telephone No. 35-4 rings. Wife 21 Dec 1906 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chr. _____ Place _____ | | | | | Ward | | | | | 2. _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Marr. _____ Place _____ | | | | | Examiners: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Died _____ Place _____ | | | | | Stake or Mission | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bur. _____ Place _____ | | | | | HUSBAND'S FATHER | | | | | HUSBAND'S MOTHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HUSBAND'S OTHER WIVES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WIFE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Born _____ Place _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chr. _____ Place _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Died _____ Place _____ | | | | | | | | | | PON THE MOUNTAINS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bur. _____ Place _____ | | | | | | | | | | le B. Stanley, J. Harold | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WIFE'S FATHER | | | | | | | | | | WIFE'S MOTHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WIFE'S OTHER HUSBANDS | | | | | | | | | | resent Wasatch County | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEX M F | | | | | | | | | | CHILDREN List each child (whether living or dead) in order of birth Given Names SURNAME | | | | | | | | | | WHEN BORN DAY MONTH YEAR | | | | | | | | | | WHERE BORN TOWN COUNTY STATE OR COUNTRY | | | | | | | | | | DATE OF FIRST MARRIAGE TO WHOM | | | | | | | | | | h County | | | | | | | | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SOURCES OF INFORMATION | | | | | | | | | | OTHER MARRIAGES | | | | | | | | | | NECESSARY EXPLANATIONS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. "How Beautiful Upon The Mts.," pp 182-3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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9-6-81

R. Raymond Green, M.D.
375 East 2nd North
Heber, Utah 84032

PEDIGREE CHART

CHART NO. _____

DATE

NAME OF PERSON SUBMITTING CHART

STREET ADDRESS

CITY

STATE

NO. 1 ON THIS CHART IS
THE SAME PERSON AS NO. _____

ON CHART NO. _____

Dr. Sabin
(no picture available)

2 Robert SABIN

BORN
WHERE
WHEN MARRIED
DIED
WHERE

4
BORN
WHERE
WHEN MARRIED
DIED
WHERE

SABIN

8
BORN
WHERE
WHEN MARRIED
DIED
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9
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1
BORN
WHERE
WHEN MARRIED
DIED
WHERE

NAME OF HUSBAND OR WIFE

GIVE HERE NAME OF RECORD OR
BOOK WHERE THIS INFORMATION
WAS OBTAINED. REFER TO NAMES
BY NUMBER.

16 ABOVE NAME CONTINUED ON CHART

17 ABOVE NAME CONTINUED ON CHART

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